

## IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Applicant: Flory et al.

U. S. Serial No.: 10/538,425

Group Art Unit: Unknown

Examiner:

Filed: 06/10/2005

For: Endotracheal Tube Holder

## INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313

Sir:

Attached Form PTO/SB/08A lists references which may be relevant to the examination of the above-identified application. Applicant reserves the right to antedate any reference cited herein if necessary.

Entry of these references into the record is respectfully requested.

Respectfully submitted

Bv:

Randall T. Erickson, Reg. No. 33,872

The Law Office of Randall T. Erickson, P.C. 1749 S. Naperville Rd., Suite 202 Wheaton, IL 60187 (630) 665-9404

Attorney Docket No.: 6304P0021US

## **CERTIFICATE OF TRANSMISSION/ MAILING**

I hereby certify that this correspondence and all referenced documents are being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450 on May 21, 2007.

Randall T. Erickson

PTO/SB/08A (07-05)

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Substitute for form 1449/PTO

Sheet 1

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

of 3

Complete if Known					
Application Number	10/538,425				
Filing Date	06/10/2005				
First Named Inventor	Flory et al.				
Art Unit	Unknown				
Examiner Name					
Attorney Docket Number	6304D0021119				

		U. S. PAILINI	DOCUMENTS	
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This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COI~IPLETED FORMS TO THIS ADDRESS. SEN6

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Complete if Known Substitute for form 1449/PTO **Application Number** 10/538,425 Filing Date 06/10/2005 INFORMATION DISCLOSURE First Named Inventor Flory et al. STATEMENT BY APPLICANT Art Unit Unknown (Use as many sheets as necessary) **Examiner Name** Sheet 2 of 3 Attorney Docket Number 6304P0021US

Examiner Initials*	Cite NO.'	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant
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STATEMENT BY APPLICANT
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Sheet 3

Of 3

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U. S. PATENT DOCUMENTS

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Of Sheet Shee

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